Approved for use through 09/30/2000. OMB 0651-0032 Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No. PC10887AJAK First Named Inventor or Application Identifier Maria S. Brown, et al. Microbial Reductase Useful For The Stereoselective Reduction of a Racemic Tetralone EL710829745US Express Mail Label No.

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.					ADDRESS TO: Assistant Commissioner for Patents Box Patent Application H Washington, DC 20231 A						
1.		tal Form (e.g., PTO/		6.		ficrofiche Co	mputer Progra	am (Appendix)	86 198		
2.	Specification	[Total Pa gement set forth be	ges [39]	7.		ide and/or A cable, all nec		quence Submission	9/83		
ł		title of the Invention			a.	Comp	uter Readable	Сору	50		
		rences to Related Ap			b.	Paper	Conv fidentic	al to computer copy	, , ,		
	 Statement Regarding Fed sponsored R&D Reference in Microfiche Appendix 				c. Statement verifying identity of above copies						
	Background of the Invention				ACCOMPANYING APPLICATION PARTS						
	Brief Summary of the Invention										
	 Brief Descri 	iption of the Drawing	s (if filed)	8.	\equiv			sheet & document(s	•		
	 Detailed De Claim(s) 	scription		9.			(b) Statement		Attorney		
		the Disclosure		l	\Box		an assignee,				
				10.	ַ ו	nglish Trans	lation Docum	ent (if applicable)			
3.	Drawing(s) (35	U.S.C. 11.3)[Total s	heets [11.		nformation D Statement (ID	isclosure S)/PTO-1449	Copies of Citations	IDS		
4.	Oath or Declara	ation [Total p	ages 3	12.	F	reliminary A	mendment				
	a. Newly executed (original or copy)					Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
		rom a prior application	on (37 CFR	۱.,							
	§1.63(c	1)) tinuation/divisional with	Box 17 completed)	14.		Small Entity Statement(s)		ement filed in prior a is still proper and de:			
	([Note Box 5		}		PTO/SB/09-1		io suii proper and de	Jiiou		
	i.	DELETION OF I		15.	\Box	Certified Copy	of Priority Do	ocument(s)			
	invento	d statement attached or(s) named in the pr ' C.F.R. §§1.63(d)(2)	rior application,		(if foreign prio	rity is claimed)			
5.		By Reference (useab		14.		Other: Pr	iority Claim				
сору о	ntire disclosure	of the prior application	on, from which a under Box 4b, is				,				
applica	ered to be part ation and is here	of the disclosure of eby incorporated by	the accompanying reference therein.	ł							
				I WOTE	EOD ITE	E 1 2 14 IN OF	DER TO RE ENT	TLED TO PAY SMALL EN	Tary		
				FEES, IF ON	A SMALL FILED IN	ENTITY STATES A PRIOR APPLI	MENT IS REQUIRE CATION IS RELIE	D (37 C.F.R. § 1.27), EXC D UPON (37 C.F.R. § 1.28	EPT		
			appropriate box, and st								
Continuation Divisional Continuation-in-part (CIP) of prior application No:											
Prior application information: Examiner Group/Art Unit:											
						ADDRESS					
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below											
Name	ame Gregg C. Benson										
Address	Address Pfizer Inc.										
Address	Patent Depa	Patent Department, MS 4159, Eastern Point Road									
City	Groton	Groton St			Γ		Zip Code	06340			
Country	United States		Telephone		(860)-44		Fax	1-(860)-441-5221			
NAME (Print/type) Jennifer A. Kispert				Regis	Registration No. (Attorney/Agent) 40,049						
Signature				Date							
			UTILITY TRANSMITTAL PTO SB 05, 9/99, (1								

PTOISB/17(2/98)
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	Complete If Known								
FEE TRANSMITTAL	Application Number				To Be Assigned	o Be Assigned			
	Filing Date				Herewith	Herewith			
Patent fees are subject to annual revision on October 1. These are the fees effective October 1., 2000.	First Named Inventor				Maria S. Brown, et al.				
Small Entity payments must be supported by a small entity statement,	Examiner Name				To Be Assigned				
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.	Group/Art Unit				To Be Assigned				
See 37 C.F.R. §§ 1.27 and 1.28. Total Amount of Payment (\$)710.00					PC10887AJAK				
METHOD OF PAYMENT (check one)					CULATION (continued)				
The commissioner is hereby authorized to charge	3. ADDIT	IONAL FE	ES		,				
indicated fees and credit any over payments to:	Large Entity Small Entity								
Deposit Account 16-1445 Number	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	F	ee Paid		
Deposit	405	130	205	65	Surcharge - late fee or or	nth.			
Account Pfizer Inc.	105	130	200	60	Sulcharge – late lee of de	141			
Name									
Charge Any Additional Charge the Issue Fee Set in	127	50	227	25	Surcharge-tate provisions cover sheet	al filing tee or			
37 C F R. § 1.1 8 at the Mailing of the Notice of Allowance	139	130	139	130	Non-English specification				
1	147	2,520	147	2,520	For filing a request for ree	examination			
2. Payment Enclosed:	112	920*	112	920*	Requesting publication of	SIR prior to			
Check Money Order Other	113	1,840*	113	1,840*	Examiner action Requesting publication of Examiner action	SIR after			
FEE CALCULATION	115	110	215	55	Extension for reply within	first month			
1. BASIC FILING FEE	116	390	216	195	Extension for reply within month	second			
	117	890	217	445	Extension for reply within	third month			
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid	118	1,390	218	695	Extension for reply within	fourth month			
Code (\$) Code (\$)	128	1,890	228	945	Extension for reply within	68h month			
104 710 201 355 Utility filing fee 710 00	119	310	219	155	Notice of Appeal	iller month	\square		
06 320 206 160 Design filing fee	120	310	220	155	Filling a brief in support of	an anneal			
(0) 490 207 245 Plant filing fee		270	220	135	Request for oral hearing	an appear			
108 710 208 355 Reissue filing fee	121	1,510	138	1,510	Petition to institute a publ	ic use			
114 150 214 75 Provisional filing fee					proceeding				
SUBTUTAL (I) (\$)	140	110	240	55	Petition to revive - unavoi Petition to revive - uninte				
2. EXTRA CLAIM FEES	141	1,240	241	620					
Extra Fee from Claims below Fee Paid	142	1,240	242	620	Utility issue fee (or reissu	10)			
Total Claims 2 -20**= 0 X 18 = 0	143	440	243	220	Design issue fee				
Independent 1 - 3*** 0 X 80 = 0	144	600	244	300	Plant issue fee				
Claims Multiple Dependent = 0	122	130	122	130	Petitions to the Commiss	ioner			
** or number previously paid, if greater; For Relssues, see below Large Entity Small Entity	123	50	123	50	Petitions related to provin	sional			
Fee Fee Fee Fee Description	126	240	126	240	Submission of Informatio	n Disclosure			
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581	40	581	40	Statement Recording each patent a	ssignment per			
102 80 202 40 Independent claims in excess of 3	146	710	246	355	property (times number of Filing a submission after	n properties) final rejection			
104 270 204 135 Multiple dependent claim, if not paid	149	710	249	355	(37 CFR 1.129(a)) For each additional inver- examined (37 CFR 1.129	ntion to be			
109 80 209 40 **Reissue independent claims over	Other F	ee (specif	y)		CAMIBIOU (ST OF R 1 12)	~~//			
original patent 110 18 210 9 **Reissue claims in excess of 20 and	Other F	Other Fee (specify)							
over original patent SUBTOTAL (2) (\$) 0	*Reduc	ed by Bas	c Filing I	ee Paid	SUBTOTAL (3) (\$)	0		
SUBMITTED BY					Complete (if Applicab	le)			
Type or Printed Name Jennifer A. Kispert					Reg Number	40,049			
Signature AM	Pate Y-12	- 01			Deposit Account User ID	16-1445			